

**510(k) SUMMARY OF SAFETY AND EFFECTIVENESS**

APR - 9 2008

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of the Safe Medical Devices Act (SMDA) of 1990 and 21 CFR 807.92. All data included in this document is accurate and complete to the best of KSEA's knowledge.

**Applicant:** Karl Storz Endoscopy - America, Inc.  
600 Corporate Pointe Drive  
Culver City, CA 90230  
(310) 338-8100

**Contact:** Monika Campbell  
Senior Regulatory Affairs Specialist

**Device Identification:** Remote Control  
Karl Storz SCB/ConMed ESU Interface Module

**Indication:** The SCB/ConMed ESU Interface Module is an accessory to a Karl Storz-SCB control devices (SCB Interface Control, SCB Media Control or ACC Control) which allows for use of the third party device, ConMed ESU models 2450/5000. The ESU's are remote controlled surgical generators operated by a Karl Storz-SCB control device via the Karl Storz interface module.

**Device Description:** The Karl Storz SCB/ConMed ESU Interface Module is an accessory to integrate the third party devices ConMed ESU models 2450/5000 units to a Karl Storz-SCB control device and permits remote control via the Storz SCB-RUI System.

**Substantial Equivalence:** The Karl Storz SCB/ConMed ESU Interface Module is substantially equivalent to the predicate device since the basic features and intended uses are the same. The minor differences between the Karl Storz SCB/ConMed ESU Interface Module and the predicate device raise no new issues of safety and effectiveness, as these differences have no effect on the performance, function or general intended use of these devices.

Signed:



Monika Campbell  
Senior Regulatory Affairs Specialist



DEPARTMENT OF HEALTH & HUMAN SERVICES

Food and Drug Administration  
9200 Corporate Blvd.  
Rockville MD 20850

APR - 9 2008

Ms. Susie Chen  
Director, Regulatory and Legal Affairs  
Karl Storz Endoscopy-America, Inc.  
600 Corporate Pointe, 5<sup>th</sup> Floor  
CULVER CITY CA 90230-7600

Re: K080410

Trade/Device Name: Karl Storz SCB/ConMed ESU Interface Module  
Regulation Number: 21 CFR 876.1500  
Regulation Name: Endoscope and accessories  
Regulatory Class: II  
Product Code: ODA  
Dated: February 12, 2008  
Received: February 15, 2008

Dear Ms. Chen:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.



*Protecting and Promoting Public Health*

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

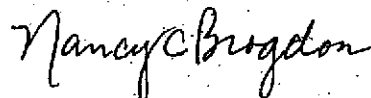
This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Center for Devices and Radiological Health's (CDRH's) Office of Compliance at one of the following numbers, based on the regulation number at the top of this letter.

21 CFR 876.xxxx	(Gastroenterology/Renal/Urology)	240-276-0115
21 CFR 884.xxxx	(Obstetrics/Gynecology)	240-276-0115
21 CFR 892.xxxx	(Radiology)	240-276-0120
Other		240-276-0100

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding postmarket surveillance, please contact CDRH's Office of Surveillance and Biometric's (OSB's) Division of Postmarket Surveillance at 240-276-3474. For questions regarding the reporting of device adverse events (Medical Device Reporting (MDR)), please contact the Division of Surveillance Systems at 240-276-3464. You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address <http://www.fda.gov/cdrh/industry/support/index.html>.

Sincerely yours,



Nancy C. Brogdon  
Director, Division of Reproductive,  
Abdominal, and Radiological Devices  
Office of Device Evaluation  
Center for Devices and Radiological Health

Enclosure

## Indications for Use

510(k) Number (if known): K080410

Device Name: Karl Storz SCB/ConMed ESU Interface Module

### Indications for Use:

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Prescription Use X  
(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use \_\_\_\_\_  
(21 CFR 801 Subpart C)


(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE  
OF NEEDED)

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Concurrence of CDRH, Office of Device Evaluation (ODE)

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(Posted November 13, 2003)

  
(Division Sign-Off)  
Division of Reproductive, Abdominal,  
and Radiological Devices  
510(k) Number K080410

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